

3. Return to Work Examinations
[Billing/payment will be at a firm, fixed fee per examination, as bid in the financial proposal (Attachment D)].
4. Substance Abuse Medical Review Officer
[Billing/payment will be at a firm, fixed hourly rate, as bid in the financial proposal (Attachment D)].
5. Medical Advisor Services
[Billing/payment will be at a firm, fixed hourly rate, as bid in the financial proposal (Attachment D)].
6. Medical Specialist Services and Laboratory Services
[Billing/payment for the contractor's efforts to make referrals to a specialist, review reports from the specialist, and ensure the accuracy of all specialist invoices, etc., will be at a firm, fixed hourly rate, as bid in the financial proposal (Attachment D)].

(The actual cost of any medical specialist or laboratory services shall not exceed the rates paid by IWIF for the same procedure. The cost shall be directly billed to, and paid by, the employing agency. Refer to Section 4.23.2 for more detailed billing/payment information for medical specialist services and laboratory services.)
7. Health Benefits Review Committee
[Billing/payment will be at a firm, fixed hourly rate, as bid in the financial proposal (Attachment D)].
8. Workers' Compensation Treatment Provider
[Billing/payment will be at a firm, fixed fee per examination, as bid in the financial proposal (Attachment D)].
9. Critical Debriefing Services for Employees and Other Individuals
[Billing/payment will be at a firm, fixed hourly rate, as bid in the financial proposal (Attachment D)].
10. Medical Surveillance Administration
[Billing/payment will be at a firm, fixed hourly rate, as bid in the financial proposal (Attachment D)].

The 4 MDOT specific services are:

1. MDOT Physical Examinations
[Billing/payment will be at a firm, fixed fee per examination, as bid in the financial proposal (Attachment D)].

4.3. PRE-EMPLOYMENT PHYSICALS:

Physicals may be performed on current employees and individuals who have been conditionally offered employment by a State agency. The exact content of such examinations shall be determined by the SMD. At a minimum, examinations shall include the following:

- (1) Personal health history;
- (2) Medical screening, to include but need not be limited to, height, weight, blood pressure, pulse, vision, pulmonary function testing as necessary, hearing (audiometric testing), and TB test;
- (3) Examination of general physical condition, e.g. dermatological, respiratory, cardiovascular, abdominal, digestive, genitourinary, musculoskeletal, neurological, etc.;
- (4) Laboratory testing to include screening tests of blood and urine (i.e. CBC, routine blood chemistry and urinalysis);

If a medical condition/illness is discovered, all additional tests and medical expenses must be approved by the DAC.

The SMD will fax to the DAC a written summary of the results of the pre-employment physical within one (1) business day of the examination. A final written report shall be submitted to the DAC within five (5) business days of the actual examination. Should extenuating circumstances arise (e.g., additional diagnostic studies are pursued or outside medical information is required by the SMD), the SMD must apprise the DAC of the extenuating circumstances and the DAC must authorize any extension of the deadlines referenced above. The SMD may appeal the DAC's decision with regard to extending the deadline to the State's Contract Monitor, who will determine the final deadline for submission of the referenced reports.

The SMD must provide an evaluation as required by the Maryland Police and Correctional Training Commission or as required by each DAC to include but not be limited to scoring/evaluation of standard psychological test(s) for Police/Correctional Officer candidates.

Drug testing for sensitive classifications/positions shall be performed by a laboratory approved by the Department.

The SMD shall review, analyze and when appropriate, discuss results of drug testing. A determination of medical qualification/disqualification shall be provided to the DAC within five (5) business days of receipt.

The SMD shall review medical information from external sources concerning applicant's ability to do the job.

If there is a discrepancy between the medical opinion of the SMD and an employee's private physician, the opinion of the SMD shall be controlling, unless otherwise addressed in a collective bargaining agreement.

b. The Workability exam shall include the following:

- 1) Personal health history
- 2) Examination of general physical condition, e.g., vital signs, height, weight, respiratory, cardiovascular, digestive, genitourinary, musculoskeletal, neurological, skin, etc.

Please note:

- The SMD may utilize routine laboratory testing as medically indicated (e.g., CBC with or without differential, blood chemistries, and urinalysis).
 - The SMD may utilize other routine diagnostic studies as medically indicated such as EKG, pulmonary function testing, plain film x-ray imaging.
 - The SMD may utilize more sophisticated (and more costly) medically indicated diagnostic studies that have been verbally approved by the DAC, i.e., CT imaging, MRI imaging, sonography, cardiac stress testing, EMG/nerve conduction studies, etc.
 - Any medically indicated or job classification required drug testing shall be performed by the laboratory under contract with the Department.
- c. When medically indicated, the SMD shall attempt to obtain appropriate medical records from the employee's treating physician(s). For example, in a case where the employee's cardiac status is in question and the treating physician recently performed a cardiac stress test on the employee.
- d. When medically indicated, the SMD may refer the employee to another medical specialist for further evaluation (e.g., cardiologist, orthopedist, psychiatrist, etc.). The referral must be verbally approved by the DAC. The referring agency will pay the costs for all such approved referrals.
- e. The SMD shall provide both a brief preliminary report and a final written report to the DAC. The preliminary report shall be faxed to the DAC within 24 hours of the exam. The final written report shall be submitted to the DAC within 5 business days of the exam. Should extenuating circumstances arise (e.g., additional diagnostic studies are pursued or outside medical information is required by the SMD), the SMD must apprise the DAC of the extenuating circumstances and the DAC must authorize any extension of the deadlines referenced above. The SMD may appeal the DAC's decision with regard to extending the deadline to the State's Contract Monitor, who will determine the final deadline for submission of the referenced reports.

If there is a discrepancy between the medical opinion of the SMD and the employee's private physician, the opinion of the SMD shall be controlling, unless otherwise addressed in a collective bargaining agreement.

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- d. When medically indicated, the SMD may refer the employee to another medical specialist for further evaluation (e.g., cardiologist, orthopedist, psychiatrist, etc.). The referral must be verbally approved by the DAC. The referring agency will pay the costs for all such approved referrals.
- e. The SMD shall provide both a brief preliminary report and a final written report to the DAC. The preliminary report shall be faxed to the DAC within 24 hours of the exam. The final written report shall be submitted to the DAC within 5 business days. Should extenuating circumstances arise (e.g., additional diagnostic studies are pursued or outside medical information is required by the SMD), the SMD must notify the DAC. Additional time will be taken into consideration by the DAC.

If there is a discrepancy between the medical opinion of the SMD and the employee's private physician, the opinion of the SMD shall be controlling, unless otherwise addressed in a collective bargaining agreement.

The contractor will be paid the firm, fixed fee bid in its final financial proposal for each workability examination it performs, after receipt by the DAC of the reports referenced immediately above.

4.5. RETURN TO WORK EXAMINATIONS

State employees will be referred to the SMD for appropriate medical examinations. Return to Work examinations of employees may be requested for on-the-job injury, sick leave, short-term disability, leave bank, employee-to-employee leave donations, and in other areas where the Department or other State agency would require a medical opinion to determine an employee's ability to return to work.

Within five (5) business days of the referral, the DAC will ensure that copies of all available medical information on the referred employee are provided to the SMD.

The Return to Work evaluation report will include the nature and extent of the illness, injury or condition, the employee's progress toward recovery, the length of time necessary for recovery, and the ability to return to work in a modified or full duty assignment.

The SMD must provide a faxed report of the Return to Work evaluation results to the DAC by the end of the next business day following the examination. The SMD must further provide to the DAC an original written copy of the evaluation within five (5) business days of the examination. Should extenuating circumstances arise (e.g., additional diagnostic studies are pursued or outside medical information is required by the SMD), the SMD must apprise the DAC of the extenuating circumstances and the DAC must authorize any extension of the deadlines referenced above. The SMD may appeal the DAC's decision with regard to extending the deadline to the State's Contract Monitor, who will determine the final deadline for submission of the referenced reports.

4.11. WORKERS' COMPENSATION TREATMENT PROVIDER

1. Provide initial treatment in non-life threatening type cases:
 - a. Provide an employee status report within (1) one hour of treatment to the DAC and within (2) two business days to the workers' compensation insurance carrier:
 - (1) Provide a report documenting the employee's account of the accident/incident.
 - (2) Provide a report to evaluate the employee's ability to return to work, authorize lost time, and establish target date of return to work.
2. Provide return to work evaluation prior to employee release to duty based on interim medical standards and/or an analysis of all job duties.
 - a. Provide follow-up care, which may be required for a specific injury/illness. After each follow-up visit send a preliminary report of initial findings within 24 hours to the DAC.
 - b. Provide a final written report within five (5) business days to the DAC and the workers' compensation insurance carrier. The reports must contain:
 - (1) Planned treatment
 - (2) Percentage (%) of current disability
 - (3) Target date for maximum recovery from this injury/illness
 - (4) Evaluation of the employee to determine whether the employee is able to return to work without restrictions based on interim medical standards and/or an analysis of job duties.
3. Should extenuating circumstances arise (e.g., additional diagnostic studies are pursued or outside medical information is required by the SMD), the SMD must apprise the DAC of the extenuating circumstances and the DAC must authorize any extension of the deadlines referenced above. The SMD may appeal the DAC's decision with regard to extending the deadline to the State's Contract Monitor, who will determine the final deadline for submission of the referenced reports.
4. Maintain medical records, files, etc. to meet standards established by workers' compensation insurance carrier and in compliance with federal, State, and local requirements.

The SMD is the case manager for long term illness/injury cases. In workers' compensation cases, the SMD shall accept the Maryland Workers' Compensation fee schedule and submit bills directly to the workers' compensation insurance carrier.

4.12. CRITICAL DEBRIEFING SERVICES FOR EMPLOYEES & OTHER INDIVIDUALS

This may include one or more group assessments and referrals for appropriate services covered by the employee's or individual's personal insurance or the Agency's general liability or workers' compensation insurance. This service must be available 24 hours a day, seven days per week on an as needed basis. All MTA employees who are referred to the SMD for FTA post accident drug and alcohol testing shall be initially assessed to determine if they are in need of critical debriefing.

4.13. MEDICAL SURVEILLANCE ADMINISTRATION

- a. Workplace medical surveillance evaluations are performed to assist in the early identification of illnesses or injury that might be related to the adverse effect of a work site exposure and/or simply the working environment. Employees who are suspected of or have a confirmed exposure will participate in a surveillance program as required by OSHA regulations and requirements.
- b. Upon initial evaluation, the medical examination should include a detailed medical and work history with special emphasis on symptoms related to the physical or chemical hazard and ability to wear personal protective equipment. Certain surveillance examinations, i.e. asbestos, respirator use clearance, require completion of a specific questionnaire as outlined in the respective OSHA/MOSH regulations.
- c. The physical examination and the associated studies (i.e. audiometry, spirometry, chest film-with or without "B" reading as required, blood and urine studies) must be performed and/or sample procurement completed as part of that examination. Additional tests may be ordered, if determined by the SMD to be clinically necessary. The list of substances requiring surveillance, by federal (OSHA) regulations as amended, includes but is not limited to:
 - Inorganic arsenic
 - Asbestos
 - Benzene
 - Coal tar pitch volatiles
 - Ethylene oxide
 - Formaldehyde
 - Hazardous waste
 - Chromium
 - Lead
 - Noise
 - Vinyl Chloride

- (4) Information concerning the respiratory equipment used and a copy of the respiratory protection program.
- g. Employees who experience occupational-related exposure to blood/body fluids shall be provided with emergency counseling and treatment, in accordance with the Public Health Services Guidelines for the Management of Health Care Workers Exposures to HIV and Recommendations for Post Exposure Prophylaxis, MMWR, May 15, 1998, Vol. 47., No. RR-7. This will allow employees to have access to the most current recommended treatment to reduce the possibility of HIV transmission and to ensure that the prophylaxis antiretroviral medications are administered within appropriate time frames following a possible HIV exposure.

If any medical specialist services or laboratory services are required in conjunction with a medical surveillance evaluation, the contractor will be paid the firm, fixed hourly rate bid in its final financial proposal for medical specialist or laboratory services (Item 4.9). All of the terms and conditions specified in Item 4.9 shall apply to medical specialist services or laboratory services that are required in conjunction with a medical surveillance evaluation.

MDOT SPECIFIC SERVICES

The MDOT employs over 10,000 employees to accomplish its mission. It requires that the SMD be responsible for delivery of the following MDOT specific services:

4.14 MDOT PHYSICAL EXAMINATIONS

- U.S. Department of Transportation (USDOT)
 - a. USDOT physicals are performed on MDOT employees who are in classifications which require them to qualify for an USDOT medical card to obtain and /or maintain a Commercial Drivers License (CDL).
 - b. The USDOT physical exam will include all of the medical elements, which have been standardized by the USDOT for CDL holders. The results will be recorded on a physical exam form that meets USDOT requirements.
 - c. If the employee/applicant meets the USDOT medical standards, the SMD shall issue the employee a USDOT medical card. (However, cards may be issued to the employee by the DAC after verifying that the SMD has completed all the necessary paperwork, signed the medical card and received the results of the drug and breath alcohol test if performed.)

9. The SMD shall provide to the designated ATR written results of a confirmed negative drug test within two (2) business days and written results of a confirmed positive drug test within (5) five business days, for random, reasonable suspicion, post accident, return to duty and follow-up testing and testing required as a result of participation in an approved drug/alcohol rehabilitation program.
 10. Drug testing shall be available to all MDOT agencies on a seven day per week, 24-hour a day basis.
- e. Alcohol Testing
1. The SMD shall conduct alcohol testing in a location that prevents unauthorized persons from observing the test or its results.
 2. The Breath Alcohol Technicians (BAT) shall be trained and demonstrate proficiency in the operation of the Evidential Breath Testing Device (EBT) and in the implementation of the following procedures:
 - a. Maintaining the integrity of the breath alcohol test;
 - b. Carefully ensuring the privacy of the employee;
 - c. Following the quality assurance plans for the inspection, maintenance and calibration of the EBT;
 - d. Avoiding any conduct or remarks that might be construed as accusatorial or otherwise offensive or inappropriate; and,
 - e. Immediately contacting the designated ATR for guidance when problems relating to the testing occur.
 3. Confirmatory test results with a reading of 0.02 or greater must be immediately reported to the ATR or designee.
 4. Within 1 business day of the test, the SMD shall provide to the DAC negative written results of all pre-placement alcohol tests.
 5. Within 2 business days of the alcohol test, the SMD shall provide to the designated ATR negative written results of all random, return to duty, and follow-up tests and testing required as a result of participation in an approved alcohol/drug rehabilitation program.

actual cost of any medical specialist services shall be within the usual, customary and reasonable reimbursement rates for this region as provided by IWIF.

4.23.3 Billing Related to Testimony

If it is necessary for any personnel of the contractor, a subcontractor, or of any referred medical specialist to provide a deposition or testimony, for each such personnel which is authorized by the Department's contract monitor, the contractor will be paid the hourly rate or a prorated portion thereof rounded off in 15-minute increments for each hour or rounded off in 15-minute portions of an hour, that each approved person spends in preparing for and/or providing the actual deposition or testimony. The contractor will also be paid the hourly rate, or prorated portion thereof, for all time spent by each approved person traveling within Maryland to attend a deposition, hearing, or court session which is more than 30 miles from the contract monitor's office in Baltimore.

For any authorized travel outside this 30-mile radius from the contract monitor's office in Baltimore, the contractor will also be reimbursed for mileage expenses at the same rate that is paid to State employees, which is currently 30 cents per mile.

Billing for travel time and mileage is only allowable for travel outside the above-described 30-mile radius. Any billing for preparation time must be accompanied by reasonable documentation of the nature and rationale for the preparation by each approved person.

Starting with the second year of the contract, and for each year of the contract thereafter, and each year after the conclusion of the contract that the contractor is still responsible to provide testimony, the contractor's hourly rate for testimony and preparation as bid in the financial proposal, shall be adjusted by the change in the expenditure category "Medical Care" in the "Baltimore-Washington" published metropolitan area, "Unadjusted" for seasonal variation, in the Consumer Price Index for all Urban Consumers (CPI-U). The adjustment will be based upon the change for the twelve-month period for each calendar year. For example, the adjustment for the contract year beginning 6/1/2000 shall be based upon the CPI-U change in the year 2000 versus the year 1999. This adjustment shall then be applied to the hourly rate for testimony and preparation which is currently in effect.

4.23.4 BILLING FORMAT AND CONTENT

Bills shall be submitted both in hard copy and electronic media that is compatible with Microsoft Access or Excel. Each invoice shall contain the vendor's address, federal tax identification number, the State contract number, and a description of the services provided, the employee's name, the employee's social security number, and the DAC. A copy of each invoice shall be provided to the DAC, as well as the OPSB's Employee Medical Services Unit. Bills shall be provided on a monthly basis and shall be segregated into the **nineteen (19) service categories** referenced in Attachment D.

